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CONTENTS

ORIGINAL ARTICLES

- Medical Activities of the Navy.
John Chalmers Da Costa, Surgeon, U. S. N. R. F. 115
- The American Flag. Hon. S. H. Davis 123

EDITORIALS

- The State's Care of the Mentally Sick 124
- Distinguished British Medical Visitors 125
- Suggested by the Chicago Meeting of the A. M. A. 126
- Opportunities in the Service 127
- The Work of the Council of National Defense 127

SOCIETIES

- Rhode Island Medical Society 128
- Kent County Medical Society 129
- Washington County Medical Society 129

HOSPITALS

- The Memorial Hospital, Pawtucket, R. I. 130

MISCELLANEOUS

- Child Care 130
- Honor Roll 130

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ORIGINAL ARTICLES

MEDICAL ACTIVITIES OF THE NAVY.*

By JOHN CHALMERS DA COSTA,
Surgeon, U. S. N. R. F.

I am making what to me is a new sort of address, hence, in the words of Irvin Cobb, I shall call my address a mutual endurance trial. I will not be statistical. Perhaps I will not be even consecutive. I am here under orders from the Surgeon General of the United States Navy to address this Society. It is a privilege to be here. It is an honor to represent the medical department of the Navy in this distinguished gathering. I aver it is a high personal honor to represent the Navy in any way, in any place, and at any time.

I am a mere amateur. A landsman in temporarily and unheroic aqueous association. One who has been permitted to serve the Navy for a time during a great national crisis and is to return eventually to his normal habitat—the civilian profession. One who has begun to follow the sea but as yet has not caught up with it. As an amateur and a landsman I can speak freely of all those things I feel without a possibility of seeming, from personal bias, to exaggerate the importance, the interest, the nobility, the romance of a sailor's life. I can say what I think without creating in your minds the feeling that the eminent public character created in the mind of an ancient colored auditor. When the speech was over the old colored man tottered out and said to some waiting friends who had been unable to get in—"He suttinly do praise hisself most high." I intend to praise the Navy, but not myself, "most high."

The Navy is the glory of American history—the champion of American liberty—the steel wall of American security—the treasure ship of American romance.

To speak of the Navy brings before us a record lustrous with achievement, brilliant with the great deeds of famous seamen and the trials and triumphs of noble patriots.

The eye of the mind sees that stout and gallant seaman, an Irishman by birth, Captain John Barry, he who was the first regularly commissioned officer of the first regularly commissioned boat of the United Colonies. John Paul Jones, who, as a lieutenant on the *Alfred*, as she lay at Walnut street wharf, Philadelphia, unfurled the first flag raised on an American warship, the flag of 13 stripes with the English Union Jack in the field; who, on the *Ranger* in Quiberon Bay, received the first salute given the stars and stripes in Europe—who, as commander of the *Bonhomme Richard*, fought the *Serapis*, grappled to her, hot gun lip kissing gun, who made answer to a demand for surrender by saying, "I have not yet begun to fight," led his crew from his own sinking ship on board the vessel of the enemy, took her by pike and cutlass, and sailed off in her with the stars and stripes at her mast head. The eye of the mind sees Truxton of the *Constellation*; Dale, the Commodore of the *Essex*, the *Philadelphia* and the *United States*; Bainbridge of the *Constitution*, who took the *Java*; David Porter of the *Essex* who beat the *Alert*; Stephen Decatur, that great seaman and splendid gentleman, the son of a native of this state. Decatur, who, while on the 44-gun frigate *United States*, beat and captured the *Macedonia*, who, while at Norfolk, proposed the famous toast, which should be the pole star of the naval officer: "Our country! In her intercourse with foreign nations may she always be in the right; but our country, right or wrong," and who perished miserably in an unfortunate duel, the result of the wicked gossip of lying tongues. Charles Stewart of the *Constitution*, who took the *Cyane* and *Levant*; Isaac Hull of the *Constitution*, who captured the *Guerriere*; Captain James Lawrence of the *Hornet*, who captured the *Peacock*, and who, struck down mortally wounded as the

*Read before the Rhode Island Medical Society, June 6, 1918

Chesapeake was being battered by the Shannon, said, with his dying breath, "Never give up the ship;" and Commodore Oliver Hazard Perry, who won the Battle of Lake Erie and thus destroyed foreign supremacy in the Northwestern Territory, and who wrote to General William Henry Harrison, "We have met the enemy and they are ours."

Long after their time Dr. Oliver Wendell Holmes wrote of those great sailors of the Revolution and of the War of 1812:

"Scarce one tall frigate walks the sea,
Or skirts the safer shores.
Of all that bore to victory,
Our stout old commodores,
Hull—Bainbridge—Porter—where are they?
The answering billows roll.
Still bright in memory's sunset ray,
God rest each gallant soul."

The eye of the mind sees Commodore Stockton in 1847 leading a land force of sailors, defeating the Mexicans at Los Angeles and seizing California. Commodore Mathew Perry in 1853, opening Japan to foreign commerce. Captain Tatnall in 1859, throwing law, diplomacy and custom to the winds, going to the rescue of the French and English, who were almost bested at the Peiho Forts, and declaring as he went: "Blood is thicker than water." Maury making those deep sea soundings which altered the world's scientific conceptions and which were set forth in his famous book, "The Physical Geography of the Seas." De Haven searching the Arctic wastes for the lost English navigator, Sir John Franklin. Wilkes exploring the Southern seas and the Antarctic in the cause of science and finding a continent which still bears his name. Rowan, Foote, Worden, Dupont, Rodgers, Dahlgren. Cushing, another Porter, and the great Admiral Farragut, who went into the fight at Mobile Bay saying, "Damn the torpedoes! Four bells! Captain Drayton, go ahead, Jouett, full speed," and the Hartford led the way. Admiral George Dewey, who, on May 1, 1898, destroyed the Spanish fleet, saying, "Gridley, you may fire when ready." Gridley fired, iron hail wrote the message of destiny in Manila Bay, and the western border of the United States was moved into the very portals of the distant sunset.

So down to our own times proud traditions have accumulated and are now being born daily.

History is being made every hour. It's a far cry from oak to iron, from canvas to steam, from the smooth bore carronade to the 14-inch rifle, from the frigate to the superdreadnaught. At the end of the War of the Revolution the Navy was practically abolished. Even in times many of us can remember (1881) there were 13 wooden steamships, so-called first raters, 4 of which were on the stocks and were never launched; 20 second raters, 19 of which were of wood, and hardly one of which was in seaworthy condition; 27 third raters, 23 of which were of wood, and nine monitors which were relics of the Civil War. Nearly all the guns were muzzle loaders and most of the largest were 9-inch smooth bores. In 1887 the Secretary of the Navy said, "There is now no Navy." (The *Americana* article upon "Navy of the United States.") Yet the high level of the personnel never wavered. Officers, enlisted men, discipline, courage and patriotism are and have ever been as of old. The nature of the men and the discipline were the same in our little revolutionary Navy as in the majestic war machine which is the Navy of to-day.

Secretary Daniels says: "The Navy as a fighting agency, as the embodiment of power, as the protector of the country from aggression, is today the pride and the reliance of America. But that Navy can speak for itself, is speaking for itself through its more than 350,000 men and more than 1000 ships now in active service, and will speak with greater emphasis when the hour comes for which all other hours have been but preparation." (*National Geographic Magazine*, April, 1918.)

A few days ago Admiral Gleaves stated that the Navy is now composed of 19,000 officers and more than 400,000 men. (*Philadelphia Press*, June 3, 1918.) It is four times greater in size than it was little over a year ago.

The present appropriation bill calls for almost one billion six hundred million dollars.

Through all its years the officers and men have always trained to the highest point to meet the supreme emergency. To some the glorious chance will never come. Those to whom it does come will meet it joyfully, rise to it instantly, face it heroically, and each will do his part ably, intelligently, quickly and calmly, and will feel and show that no sacrifice is too great when his country needs it or expects it.

The Navy is a great career, a fine career, a splendid career. Broad enough for any man's ambition.

The enlisted men are educated, intelligent, healthy and clean. The line officers are highly trained sailors and fighting men. Macaulay, in speaking of the commanders of the Navy of Charles II, said: "There were gentlemen and there were seamen in the Navy of Charles the Second. But the seamen were not gentlemen, and the gentlemen were not seamen." When we speak of the commanders of our Navy we say, the sailors are gentlemen and the gentlemen are sailors.

In peace the Navy is always busy throughout the world and is ever occupied in preparation. At the present time it is intensely and heroically busy. One hundred and fifty vessels and 40,000 men represent the nation on the war front across the sea. (Gleaves Ibid). When this grim war shall be over it will be learned that every boat has participated in dramas as tremendous as those Kipling has written or Conan Doyle has told. Every boat! From the destroyer, that fierce, swift watch dog of the deep, which haunts with ceaseless vigilance the lonely, mist clad, submarine infested, North Atlantic, to the great battleship,—which—

"From a mass of metal red
Human hands in many days
Bring to being, grim and dread,
Lord of All the Waterways.
Grey and solemn on the wave,
Vast of beam, immense of length;
Coldly scorning death and grave—
Citadel of monstrous strength."
(—Walter Wood.)

The Navy is ever increasing. With every increase of the Navy the Medical Corps wants more men. The Council of National Defense asked for 1,000 doctors and the Navy got them. With every new ship and new batch of seamen more doctors will be required. The Navy will want men for the regular service, young men who will enter it for a career and become part of it for life. It will want men for the N. R. F., men who will enter for the emergency and will place their medical talents and experience at the service of the Government.

To all men considering applying for the regu-

lar service or the R. F., I want to bring home the conviction that the Navy is a service of the greatest interest, usefulness and honor. In this world so rich in the commonplace, the Navy still holds romance. It speaks to us of the sea, its stories and its mysteries, of

"Sails of silk and ropes of sendal,
Such as gleam through ancient lore.
And the singing of the sailors
And the answers from the shore."

Which one of us as a boy has failed to be lured by the charm and mystery of the sea? All real boys feel it. The fundamentals of a nature may be masked, held in check, baffled, spurned, they are never destroyed. The boy is father to the man. All of us to-day feel within us the stirrings of that old romance:

"Sailor songs to sailor tunes,
Storm and adventure, heat and cold.
Schooners and islands and maroons,
And buccaneers and buried gold."

I have said something of the Navy in general. I must now speak of the naval surgeon in particular. He is, I am glad to say, always addressed as Doctor. That he is always a doctor marks him out in a certain definite way. He has rank, he has the uniform of his rank, he has the salary of his rank, but he is always a doctor. That's how he is addressed, be he the Surgeon General (who ranks an admiral) or the most recently appointed assistant surgeon (who ranks a lieutenant of the junior grade). All are doctors. I like this plan. I would be sorry were it altered. Surely no title could be more honorable or more respected. The very fact that the naval surgeon bears it and wears it secures for him a peculiar and a gratifying position. It helps to make him the friend, the adviser, the confidant, the counsellor of his shipmates, high and low.

The surgeon's rank is every whit as good as the rank of the line officer. There is no discrimination. His position on a boat or in a station is an enviable one, a position which secures liking and respect, unless he sacrifices those things by vanity, aloofness, meddling or temperamental maladjustments. There is no caste. Certain men are designated to give or

ders; certain men must receive orders. Years and years ago there were disagreements and bitter ones between the medical men and the line officers. There were quarrels, misunderstandings and sometimes inveterate personal dislikes. For instance, an old and retired medical officer told me that when he was a young man the fleet surgeon was involved in a fierce quarrel with the fleet commander as to the prerogatives of medical officers. The fleet was in harbor at a South American port. The American Consul had a pretty daughter. It seems to be a special ordination of Providence that consuls should have daughters of that sort. I fancy the genuine American girl looks especially good to an American sailor who has been long in foreign parts. At any rate she was a pretty girl. That pretty girl had a favorite dog. The dog broke its leg. The girl was terribly grieved and in spite of parental protests determined to go to the boat and ask her friend, the Fleet Surgeon, to come on shore and treat the animal. She went out to the boat. The Fleet Surgeon and several officers were on deck. The old surgeon was still flushed and angry from his recent red-hot controversy. The girl told him the story and begged him to forgive her for asking him to attend a dog. The surgeon said in the hearing of many officers: "Of course, I'll see the dog. Don't apologize. Why shouldn't I attend a dog? Haven't I been attending line officers of the Navy all my life?" Years and years ago harsh feelings did crop up at times, but such things are dead now, dead as the forgotten dynasties of Egypt. A number of years ago the system that made for disagreement vanished as suddenly and completely as an automobile which had just run over a boy. The position of a medical officer in the Navy is one of proper dignity and high authority. As Surgeon William H. Bell says (Keen's Surgery, Vol. VI), "The Medical Department is now recognized as a coördinate and coöperative (not subordinate) branch of the service."

In this connection we might well use a word employed by Vice-Admiral Sims to set forth the real relation of the United States to the Allies. The word is "consolidation." In the Navy—the line, the pay corps, the medical corps, the engineering corps are consolidated. What is demanded and what exists is not so much co-operation. It is *team work*. Even the most pro-

found stupidity, if unaided by whiskey, would fail to suggest weakening or dissolution of this most valuable consolidation.

The duties of a surgeon in the Navy vary in many ways and in some ways very widely from the duties of a civil practitioner. In civil practice the individual patient is the sole object. In the Navy military necessity must govern absolutely and there will be times when the good of the mass must be balanced against the good of the individual. The supreme and imperative end to which the Navy looks is battle. For battle the Navy must be ever ready. For battle the men of the fighting force must be in the very pink of condition, fit at a moment's notice for any emergency. There must also be ready an ample supply of all materials that may be needed, and the materials like the men must be of the best. Among the materials there must be nothing that has deteriorated, nothing that has spoiled, nothing that has corroded. Every knife must be keen. Every dressing must be sterile. Among the men there must be none who is hard of hearing, maimed of limb, dull of mind or bleared of vision. The poor eyesight of a gunner might protect an enemy better than that foe's own steel turrets. Deafness, by preventing the understanding of an order, might be responsible for the destruction of a ship. Slowness of movement on the part of a boat's crew might lose a landing party. An epidemic in a fleet might mean the loss of a battle or even of a war. Constant inspections and endless training are absolutely necessary to secure good results.

In battle the surgeon's first aim is to give early treatment to the wounded, especially to those who may recover, and most particularly to those who may recover rapidly and soon take their places again with the fighting men. Fighting men gain in coolness, courage, stamina, effort and resolve when they know that the wounded will be cared for ably, kindly and promptly.

The second aim in battle is to evacuate the wounded as quickly and as easily as possible. The ship, if able to proceed, is thus freed for further military activities of fight or pursuit, and the wounded are taken to a point where treatment can be carried out at leisure with proper help and facilities.

In a naval hospital the disease or injury is treated exactly as it would be treated in the best

civil hospital, but the surgeon in charge of a naval hospital must know and do many things which never have to be considered by the civil surgeon. In a civil hospital a patient goes out as soon as he is able to care for himself or as soon as he can be cared for outside. In a naval hospital a patient must remain until able to return to work. The day the seaman returns to his ship he begins to do his full work. The naval surgeon must attend to all sorts of things from giving an orderly a liberty pass to amputating a leg, from inspecting supplies to supervising the construction of a new wing to the building. He has the care of all property. He must see to all papers and records. These records seem hopelessly complicated to a novice but the complication is only apparent. It serves a highly valuable purpose and because of the records it is, at any time, possible to find out where a man is and all about him, yet that man is but one among more than 400,000.

The surgeon must make out various elaborate reports and must make them out in exact accordance with ordained form. He must endorse applications and complaints; enforce discipline, teach and train various subordinates, do duty on boards of examination and survey, sit on courts-martial, take up special problems of sanitation, hygiene and various other things. To do these things in proper form (and the Navy will have them done no other way) the surgeon must have read, studied, digested, and mastered all the Naval Regulations and all the Naval Instructions. I say to you that no surgeon, fresh from civil life and devoid of naval training, is fit to be in charge of a naval hospital or a naval training camp or in medical charge of a ship. Of course he could make diagnoses, prescribe medicines, and perform operations, but were he to take full charge of that hospital, camp or ship, he would plunge everything into hopeless chaos. Chaos inevitably means inefficiency and unpreparedness. The essences of the Navy are efficiency and preparedness. Unpreparedness might mean frightful disaster. A trained naval man must, of necessity, be in charge. If you should ever hear anyone criticize the Department because officers of the R. F. do not receive rank above that of Surgeon, take it from me, as one of the R. F., it is not the result of jealous or unjust discrimination. Officers are not fit to receive higher rank until specially trained in all the

technicalities of the duty. To give members of the R. F. advanced rank simply because of prominence in civil practice would be a bitter wrong to the service. Were a man to clamor for such advancement he would give the best evidence of unfitness for it. I do not believe that the members of the R. F. expect it or ask for it.

The naval surgeon is a specialist—not a narrow specialist but a peculiarly broad one—a specialist who must study many specialties and who must receive a rigid and peculiar training. Surgeon General Braisted says (N. M. S. 127,404, February 15, 1917): "It must be remembered, therefore, that the medical officer of the Navy is a specialist; that Navy medical work is a special branch of medical and sanitary practice and must be viewed as one among the many other special fields of medicine. It, however, differs so essentially from civil practice that this training must be of a character peculiar to the problems of the naval service."

The well trained naval surgeon knows far more of various branches of medicine than does the average civil specialist. His duties require him to be a sanitarian, hygienist, surgeon, practitioner of physic, bacteriologist and statistician. "In conjunction with his duties the medical officer may also perfect himself in some branch of medicine for which he has a particular bent or liking. He may specialize as a hygienist, a specialist in tropical medicine, eye, ear, etc." (Surgeon General Braisted, *Ibid*). When I talk to trained naval surgeons I am frequently ashamed of the narrowness of my own technical reading. I would make a fine mess of cultivating, staining and identifying bacteria—of demonstrating by laboratory methods certain tropical maladies and blood diseases—of planning a hospital for contagious diseases—of taking over the sanitation of a town. A trained naval surgeon could do one or all of those things as a matter of course.

The high repute of professional naval surgeons is shown by the fact that four recent Presidents of the United States, the present incumbent being of the number, chose naval surgeons for family physicians.

The able and distinguished Surgeon General, Doctor Braisted, in his admirable brochure on "The Navy as a Special Field for Medical Work," a pamphlet I advise all of you to send

for, (N. M. S. 127,404, February 15, 1917), speaks as follows:

"The Navy consists of its ships or floating force, its navy yards for the building, repair, and upkeep of these ships, its naval training stations for the training of men to man these ships and yards, its naval hospitals for the treatment of the sick, etc. Each one of these units is a community in itself, with one department interdependent upon another. A ship with its complement of several hundred men is similar to a small town, having consideration for its water and food supply, its sewage disposal, lighting of the passageways and living apartments, heating and ventilation of its living quarters, protection against epidemic diseases, maintenance of the general health of the community, general hygienic and sanitary matters; in fact, almost every question that arises in a small civilian community. On board this ship there are officials who represent in a similar way the various officials of a town. It can be readily seen, therefore, that the medical officer represents not only the board of health but also the sanitary inspector and the medical adviser and family physician. In other words, he looks out for the general hygienic and sanitary matters and treats all the sick. His is a combined duty. He represents all the medical talent available to any community. However, as this community in which he is located moves about over the globe from one region to another, he first must deal with conditions of a northern climate and again with the conditions of a tropical climate. He must at all times maintain the health of the personnel in the highest state of effectiveness. In order to do this the medical officer must keep himself thoroughly informed of advances upon all medical matters and general sanitation; he must be familiar with the latest information relative to the cause and prevention of disease, modern means of lighting and ventilation, special treatments of special diseases, and be ready at any time to undertake to the best of his ability any question which may be brought to his attention. It is therefore necessary that he do much reading of medical publications, and that he must not lag behind in the rapid advances of medical knowledge."

You observe, gentlemen, that the naval surgeon does not and must not stagnate. He reads,

studies and investigates. He must else he would have disaster on his ship, in his camp or in his hospital. There are few men seen in the sick bay of a war ship. That doesn't mean the surgeon is an idle man. He is a very busy man. By keeping busy he keeps the sick bay empty. Were he lazy it would be full. Repeated rigid examinations for promotion force even the mentally indolent surgeon to study in order to keep abreast of the times. Literary effort is encouraged by the publication in that admirable journal, the U. S. Naval Medical Bulletin, of papers and reports. It is a very responsible thing to have charge of the health of a thousand men in the narrow quarters of a battleship or of several thousand in a transport. The Navy cannot afford to let any man have charge unless he is expert in all problems of fumigation, isolation, ventilation and sanitation and contagious diseases. Think of the immense responsibility of one who has charge of the health of a great fleet or of a huge training camp.

An epidemic of scarlatina, variola, typhoid or cerebro-spinal meningitis might put half or two-thirds of the boats of a fleet out of service and so might cause the loss of a battle or even a war. Preventive medicine is *the* great thing. It must be a source of just pride to our able Surgeon General, Doctor Braisted, and to all his efficient assistants, that the health of the fleet is as good or even better than in times of peace.

The naval surgeon is no carpet knight. He cannot be scoffed at on such a ground. There is no Red Cross on a battle ship. The surgeon is in just as much danger as the combatants. During the first three years of the war fifty-six British naval surgeons were killed in action or went down with their ships (H. C. Ferraby in Philadelphia Press, May 19, 1918). In a fight or an accident the surgeon must look out for and stay with the wounded as the hospital ship will be far in the rear. To appreciate the trials, perils and difficulties of the surgeon when in action read of the work of the naval surgeons in the battle of Jutland, how operating rooms were destroyed, how hard it was to move the wounded to the operating room and from it to make room for others, how electric light systems were annihilated, and how on one boat cases were dressed when water was two feet deep on the floor of the operating room. In the British attack on Zeebrugge one surgeon worked over the wounded,

standing in gasoline over his ankles. By mere good fortune the treacherous fluid was not set alight.

After Jutland, Admiral Beatty wrote as follows: "Exceptional skill was displayed by the medical officers of the fleet. They performed operations and tended the wounded under conditions of extreme difficulty. In some cases their staff was seriously depleted by casualties and the inevitable lack of such essentials as light, hot water, etc., in ships damaged by shell fire, tried their skill, resource, and physical endurance to the utmost." (Ferraby, *Ibid.*)

So far our Navy has had no great sea battle. But, to a certainty, its day will come. Look forward to it with perfect confidence. It will be worthy of its record and its reputation, of the cause and of the country.

Medical Inspector Murphy, U. S. N., gave to the Council of National Defense an outline of the activities of the Navy for the first year of the war. He quoted the report of the Sub-Committee of the House Naval Committee, made after a careful investigation of the Navy. The following are the views expressed by the Committee regarding the Medical Department:

"The first battle of the war, that against disease, was fought and won by the Medical Department of the Navy, under Rear Admiral William Braisted.

"After diplomatic relations with Germany were broken in February, 1917, recruits, we find, streamed into the service in increasing numbers, and in April there was grave danger that the overwhelming influx of volunteers would overtax all training stations and receiving-ship facilities and bring disaster to the Navy at the very beginning of the war by the introduction and spread of epidemic diseases, which unfortunately were widely prevalent throughout the country at that time.

"The Navy in this early critical period was fortunate in having as its Surgeon General a far-seeing man, of the clearest judgment, who had the confidence of the medical profession at large and who inspired confidence and loyalty in his own corps. Admiral Braisted, possessed of unusual ability as an organizer and administrator and an intimate knowledge of the needs of the service, was eminently fitted to direct the activities of the Medical Department. Patient and optimistic, and with a quiet force of character which accomplished results, he began at once,

without delaying even for appropriations, to prepare for eventualities which he clearly foresaw. Except for an occasional outbreak of those diseases which commonly occur among recruits, the health of the Navy has been quite as good as in times of peace. In spite of all the difficulties in the way of rapid expansion, and the sudden necessity for the training of new medical personnel and Hospital Corpsmen, the health of the force afloat has been even better than in peace times.

"The Medical Department facilities have undergone tremendous development everywhere. The excellent and finely equipped base hospitals which were built before the war, largely through foresight on the part of the Surgeon General, have been greatly expanded with a speed which could not have been attained if the organization of the Medical Department as a whole had not been carefully thought out long before war came and plans perfected for the immediate enlargement of base hospitals and the construction of emergency hospitals of the finest type wherever necessary. The total bed capacity of naval hospitals was thus increased in a period of a few months from 3,800 to more than 15,000 beds. The mothers of the country can rest assured that in these hospitals their sons will receive excellent care and nursing and the most skilled treatment that modern medical and surgical knowledge permits. The naval hospitals at Great Lakes, Ill., and Norfolk, Va., are already two of the largest hospitals in the United States, and with the authorized additions to the Norfolk hospital it will be one of the greatest institutions of its type in the world. The Navy Nurse Corps, comprising women of the highest type in the nursing profession, has been increased to more than 700.

"On board ship and at naval stations the health of the men is protected by all the safeguards known to preventive medicine. The Hospital Corps, upon which falls exclusively the nursing of the sick and wounded outside of hospitals, has been increased from 1,500 to nearly 9,000.

"Hospital Corps training schools have been established in connection with the training stations at San Francisco, Great Lakes, Newport (R. I.) and Hampton Roads. In these schools young men of good character and aptitude are intensively trained for their duties at sea.

"Foreseeing that the hospital ship, now under construction, and which the Surgeon General had long asked for, would not be completed in time

to meet the war needs of the service, two large liners were secured and converted into hospital ships to supplement the work of the hospital ship *Solace*. To assist the Army in bringing back the sick and wounded from abroad, Admiral Braisted arranged that the transports operated by the Navy should have ample Medical Department facilities and necessary equipment, and so far as naval facilities exist has assumed responsibility for the medical and surgical care of all Army sick and wounded who may be transported home on naval vessels from Europe.

"For the care of our naval forces in England, France, and European waters three base hospitals are already in operation abroad.

"In expanding the Medical Department to meet the present and future needs of the Navy, we were glad to find that the needs of the increasing numbers of industrial workers and other civil employees in the large manufacturing plants in navy yards had not been overlooked. The peacetime humanitarian work is also being continued in connection with Haiti, Santo Domingo, Virgin Islands, Samoa, and Guam, involving a population of over 2,000,000 people.

"It may well be said that the reason for this successful record is to be found in the bureau's preparedness, due to foresight and co-operation."

Doctor Murphy says—"Doctor Braisted feels, I know personally, that the very complimentary expressions, which the Committee were kind enough to employ about him are not wholly self deserved, but should be most fitly applied to his personal staff, including the civilian employees of the Bureau, to the hundreds of his loyal medical officers, both regular and reserve, ashore and afloat, and to the nurses and hospital corpsmen whose perseverance, whose patience, whose intelligence and whose industry so largely contributed to produce the favorable results, which seemingly have been accomplished.

Doctor Murphy said, in closing: "I would like to say that with the commencement of the second year of war, Doctor Braisted is making every effort to foresee and provide for the future. The expansion of Medical Department facilities, touched upon in the committee report mentioned, is still going on. All the hospitals are being prepared by increase of beds for the expected enlargement of the Navy, its increased activities, and for the winter to come. These activities, it is expected, will double our responsibilities for

the coming year, and we hope at the end of the second year of war that we of the Naval Medical Corps may be guided, as before, by the Surgeon General to as happy an ending as seems to have been the case for the year just passed."

In regard to the wonderful health of the Navy in war time Vice-Admiral Sims, the able and gallant commander of our over-seas fleets, sends the following message to the fathers and mothers of his sailors. He says of their sons: "Of course they must take sailors' chances. That is the sea, and that is especially the sea in war time. But the great majority will escape war's hazards, and will be kept in fine health and fine morals, and will be trained to be real men. If they lose their lives they will lose them in a noble cause, and the total loss of life in the American Navy during the Great War is likely to be far less than the aggregate of years which will be added by its training to the vast majority whose lives will not be lost." (Philadelphia Press, May 26, 1918.)

We are all proud of our Navy. We doctors are all proud of the Medical Department of the Navy. The Navy is doing splendid things—is doing them quietly, unostentatiously, heroically and with marvellous efficiency. It may well be the deciding factor in this great war. Were I so fortunate as to have a son I would wish for him no finer or more useful career than is offered by the Medical Corps of the Navy.

A man who makes it a career can't become rich. That's a good thing. What is a more worthless ambition than to become merely rich. To be nothing but an idle rich man, to occupy the same relation toward mankind that a cat does to a cream jug or a rat to a corn crib and to have no interests in life except the daily performances of a broker, a cook, a bar keeper and a golf club, is not a high ideal. Isn't it better, far better, to be secure of a modest competence, to be a *real* man, to be a useful man, to serve the country in peace and in war, to be an integral part of that great and beneficent organization—the Navy? The Navy! which did so much to secure our liberties. The Navy! which now defends and propagates our freedom—that freedom—clear and crimeless—which has made of us what we are and ought to be—the radiant morning star which is looked to for hope and guidance by all of the democratic longings of all of the nations of the world.

THE AMERICAN FLAG.

HON. S. H. DAVIS,
Westerly, R. I.

As I approached your attractive new building this afternoon, I saw floating from its staff the most beautiful banner that was ever unfurled over any building, state or country. The beauty of the banner consists not in its color or design, but in the things for which it stands. Neither can the value of the banner be estimated in the cost of its material, the fineness of its texture or the skill with which it was wrought, but in the heart-aches, the fears, the tears that have been shed for the lives lost that the principles for which that flag stands may live. So it is that the American Flag which we honor today has become more beautiful with the passing years. It was a thing of beauty when it first flew over the thirteen original colonies. It has become more beautiful when in 1814 Robert Scott wrote from his prison cell, "And the rockets red glare gave proof through the night that our flag was still there." It had added still greater beauty in 1865 when it was replaced over Fort Sumter.

A greater glory had been added to the American flag in 1878, but the most beautiful thing these eyes ever beheld was the flag of my country in the distant land. It is a symbol of the power, the glory and the strength of 50,000,000 Americans. Nearly forty years have passed since those memorable works. Now 100,000,000 hearts leap at the sight of Old Glory and there are thousands nestled beneath its folds in the isles of the sea, while untold numbers of twenty-two nations of the earth are looking to the American Flag today for deliverance from the most terrible, wicked, and bloody war the world has ever seen. And is it any wonder that the Premier said "when the American flag is unfurled on our battlefield, it will be more than furnishing military aid come to our assistance."

Is it not because the American flag has in it more of a spirit of liberty and freedom than any other that the nations of the earth are looking to it in their time of need?

Cyrus, Alexander, Napoleon, and Caesar as well, together with the Kaiser, have in turn tried to rule the world by naval and military power, but the determination of the Kaiser, like that of

Alexander and Napoleon, will be broken on the Alpine peaks of his ambition, for some day a million American mothers' sons will carry Old Glory through the streets of Berlin.

All those who have gone, are going, and will go, the Y. M. C. A., the Red Cross, the professions are going. To some of us whose heads are too white, who are too old for military service in the field, or because of our business relations are not going. But some of us are saying "I cannot afford to do it." What shall we say of our glorious boys giving their lives on the sea and in the trenches? Are they giving just what they can afford, or are they giving to the limit, to the last drop of blood? What shall we say to the mothers, and the little kiddies in the shell-torn towns of France, homeless, husbandless, fatherless, hungry, ragged, and yet are they giving what they can afford? And they are not giving one bit more than your mother, wife and the kiddies would be giving had it been that the gardens of America instead of France were next to the Wild Boar of Europe.

Men of the medical profession in times of peace have added more to the glory of the American Flag than you know, and in this time of national stress and world stress no class of men are so much demanded and needed in the support of the flag of the country as are you today. Our sorely pressed allies need you, our boys need you.

Information came to me yesterday which I fear is all too true, that the most splendid specimens of American manhood being taken by the Germans are being castrated. Men, if that is true, this war should not end, the American Flag should not be furled as a war flag until every man in Germany shall be castrated, until his seed has banished from the earth.

Our boys cannot stand against shot and shell and they need not, when American doctors can go, should go, and will go to their rescue. One Red Cross hospital in France a year ago treated 46,000 for gas gangrene. Every one of these cases would have been fatal without treatment, and there was less than 400 out of the 46,000 lost.

For the glory of the flag, every man here should do his work in the next year.

Whether the flag was first conceived in the heart of Washington or in the fingers of Betsy Ross will never be decided.

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RHODE ISLAND MEDICAL SOCIETY

Meets the first Thursday in September, December, March and June

GARDNER T. SWARTS	President	Providence
JOHN M. PETERS	1st Vice-President	Providence
JESSE E. MOWRY	2d Vice-President	Providence
JAMES W. LEECH	Secretary	Providence
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JAMES M. BODWELL Secretary Phenix

NEWPORT
Meets the third Thursday in each month
EDWARD V. MURPHY President Newport
A. CHACE SANFORD Secretary Newport

PAWTUCKET
Meets the third Thursday in each month excepting
July and August
ARTHUR H. MERDINYAN President Central Falls
CONRAD E. THIBODEAU Secretary Pawtucket

PROVIDENCE
Meets the first Monday in each month excepting
July, August and September
WILLIAM F. FLANAGAN President Providence
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Meets the second Thursday in January, April,
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A. B. BRIGGS President Ashaway
W. A. HILLARD Secretary Westerly

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Meets the second Thursday in each month excepting
July and August
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Section on Diseases of Children—3d Tuesday in each month, Dr. Henry E. Utter, Chairman; Dr. J. S. Kelley, Secretary and Treasurer.

Section on Gynecology and Obstetrics—3d Wednesday in each month, Dr. C. W. Higgins, Chairman; Dr. E. S. Brackett, Secretary and Treasurer.

Section on Medicine—4th Tuesday in each month, Dr. D. Frank Gray, Chairman; Dr. C. W. Skelton, Secretary and Treasurer.

R. I. Ophthalmological and Otological Society—2d Thursday—October, December, February, April and Annual at call of President, Dr. Harlan P. Abbott, President; Dr. C. J. Astle, Secretary-Treasurer.

EDITORIALS

THE STATE'S CARE OF THE MENTALLY SICK.

Some things we have done well in Rhode Island, and, quite naturally, some things we have done less well. For many years this State has been dominated, one might almost say oppressed, by a tradition as false in principle as it is in practice unsatisfactory. When the social conscience of the community was not as enlightened as it is at present, the care of the mentally sick was looked upon rather as a disagreeable necessity than as a duty and a high privilege. The man

with a sick body was gladly received into a hospital for general diseases; the man with a sick mind was a perplexing problem,—he was sent more often than not to a jail. It was inhuman and irrational, of course, but it was a practice born of the conviction that somehow the mentally sick man was not in the same category with other sick men. He was a social pariah whose misfortune was treated as a fault and whose disease was punished as though it were a crime. We do not say that the community *actually* believed mental disease to be a crime, but we do say that *practically* they acted with regard to it as if it were.

In the Commonwealth of Rhode Island we, through our representatives, made the initial and

regrettable mistake of thinking of insanity in terms of crime, that is to say, we looked at it through legal rather than through medical eyes, and, accordingly, we made a bad beginning,—we built our hospital for the mentally sick together with our penal institutions at Howard. We have paid the price of that mistake ever since; and this not only in the important matter of sentiment, but also in the equally important matter of practical organization and management. You cannot mix the medical and the penal problems and get anything but confusion. They are, in their very essence, distinct and what is good for one is bad for the other. Hence we observe that in the public mind of Rhode Island the name "Howard" gives rise to feelings of mingled sorrow and chagrin, for it means not only a haven for the reception and treatment of sick men, but also a goal for the detention and punishment of bad men. Thus it is that the ignorance of our fathers has landed us in a dilemma from which, as yet, we have not escaped.

We are referring to the State Hospital for mental diseases, because we wish to call the attention of our readers to the very great improvements that have been inaugurated, and some of which have been completed there, within recent years. What was once a broken-down institution, not fit for human habitation, has been altered, for the most part, into a thoroughly modern hospital of which any State might well be proud. There are some things yet to be done, but if present accomplishment is an earnest of future deeds, physicians and the community they serve may rest assured that Rhode Island is mindful of her mentally sick. But the old bugbear remains,— "Howard" means not only sickness but crime. Is it too much to hope that with modern ideas and experience to guide them our representatives will find some way to separate the sick in mind from the criminal in law? As things stand now, the situation is an anachronism. It will continue to be so as long as the House of Correction confronts directly the State Hospital for Mental Diseases.

DISTINGUISHED BRITISH MEDICAL VISITORS.

We are accustomed by this time to the visits of foreign missions, and for a time a new one

appeared in this country each week. The recent visit to this country of Sir James Mackenzie, Colonel Sir William Arbuthnot Lane and Colonel Herbert Alexander Bruce of Toronto has a particular interest for the medical profession and doubly so at this moment when we are endeavoring to recruit our medical reserve corps to full strength. The mission toured the principal cities of the East and middle West, and spoke at various medical meetings and entertainments. They were greatly impressed by the thorough manner of our medical preparedness.

Sir James Mackenzie praised highly the classification of American surgeons as reported by Dr. William J. Mayo for the Committee on Surgery of the General Medical Board. The class indexing and coding of the more than 20,000 American physicians was termed ideal by Sir James, who said that the United States is avoiding the mistakes made by England. "England," he said, "was precluded from such a systematic course by the suddenness with which the war came."

Colonel Lane told of the enormous help given by American surgeons who came over long before America's entry into the war, saying that he had been asked to speak about the difficulty of getting medical men for the military service. He said: "The difficulty with us has been to keep them out. I do not suppose you are any different from our men. I have always understood that the medical people in America were the keenest people in the world. Our people have gone without a word. They gave up their practices, their futures, their wives and their children. They did not ask: 'How much are we going to be paid?' or 'What is going to become of our families?' they came at once to the aid of their country. I do not think you will have to ask the medical men to come. I think the difficulty, my friends, will be keeping them away."

Colonel Bruce said that the work of the medical men in the armies had stamped out typhus and typhoid fever, there being when he left France only twenty-seven cases of typhoid fever in an army of two million men.

Speaking at Philadelphia, Colonel Lane said: "When America sent Dr. Alexis Carrel to Europe she did more than if she had sent ammunition, guns and food. His discovery has worked miracles among the wounded of the Allies." Colonel Lane also praised highly the other doctors and nurses from the United States.

SUGGESTED BY THE CHICAGO MEETING OF THE A. M. A.

Some years ago, after attendance upon a session of the American Medical Association, a young physician remarked to an elderly one that he always felt depressed after the annual convention because of the many things he saw and heard concerning which he was ignorant and that he went home feeling that he really knew very little of the science of medicine. "Cheer up, son," said the older man, "there are probably lots of things you know that the rest don't." There are advantages to be gained by attendance at the annual meeting of the American Medical Association which are not to be measured from a strictly scientific viewpoint, and not the least of them is the study of human nature. Physicians as a rule are as human as the rest of the world and their foibles are nowhere more evident than in a great gathering of medical men.

The recent meeting at Chicago was a war meeting, everybody talked war, social functions were replaced by war speeches, and even the war was introduced as a factor in the political struggle for the office of president. A member from a Western State made an eloquent plea for the Navy and cited what great good had been accomplished by Secretary Daniels in his prohibitory amendment to former naval customs and advocated prohibition for the duration of the war and ten minutes later was imbibing steins of beer in the bar of the hotel. Two distinguished physicians talked learnedly of genetics and the effect of clean living on future generations and immediately after adjournment they both went to a moving picture theatre which had over its doors "No Ladies or Persons Under Sixteen Admitted." The physicians in attendance smoked just as much, ate quite as much of indigestible food, drank as many cocktails, and found as much fault with the prices charged for eatables and drinkables as an ordinary layman. They flocked about the booths in the exhibition hall when they gave away ice cream, while the scientific exhibit was far from crowded. They collected samples of medicines and souvenirs of the occasion quite as religiously as in former years, but did not subscribe for as many books as usual, and there was a notable diminution in the number of listeners at section meetings where the topics under discussion were not of a practical nature.

Medical politics, a feature which has done more than anything else to alienate that proportion of the profession which cares little for the office seeker, was much in evidence. There was an amount of wire pulling for the election of president which was neither dignified nor in accordance with the expressed conviction of the Association—that solicitations of votes for officers is not in accordance with the ethics of the profession.

The appointment of committees and the work done in committee was largely prearranged, and while this may have been conducive to efficiency, in once instance at least it resulted in the chairman of the committee making his report without consulting all the members of his committee and not entirely in accord with their expressed opinions.

While Chicago may be an ideal convention city, it is not adapted for the meetings of the American Medical Association if the sections are as widely separated as at the last meeting and the executive meetings held at a considerable distance from hotels. Chicago temperature in June is not conducive to long walks, and while taxis are cheap, they were not patronized by the average man as largely as by those whose expenses were paid by State or State organizations.

There was evident an aversion to unsolicited opinion. The House of Delegates with an exceedingly able executive moved like well oiled clock-work and only occasionally was there a squeak, which promptly subsided with the addition of a little more parliamentary lubricant.

The hotels were, as a rule, satisfactory and the charges, save at two of the larger ones, while high were not at present prices exorbitant. The delegate from Oklahoma remarked that where he lived he could get a cup of coffee, two fried eggs and a hunk of bacon for thirty cents, but in Chicago it cost him a dollar and a half, and the waiter thought the change from a two-dollar bill was his tip and thanked him for it.

Next year at Atlantic City the Rhode Island physician who does not attend the annual meeting will miss an educational function as well as an enjoyable vacation, and if he goes will return to his daily grind with broader views of the profession, a more intimate acquaintance with its members, and an incentive to greater effort.

OPPORTUNITIES IN THE SERVICE.

To many of the physicians who have patriotically responded to the call for volunteers for service in the Army or Navy, leaving a growing or well established practice has represented a very considerable sacrifice, cheerfully made but nevertheless entailing hardship for themselves and their families. In many instances such men have found after their induction into the service, opportunities for professional training such as could not have been presented to them had they remained in private practice; opportunities which to some extent can compensate for their personal sacrifice.

Chief among these benefits that accrue to the man transplanted from private practice to military or naval service is the opportunity for close association and consultation with other men, many of them experts in various lines. This association is often much more intimate than that between men in civil practice. In the larger army base and naval hospitals it may almost amount to a return to the days of hospital internship, an experience most beneficial to every practitioner.

Furthermore, the men that come under the charge of the doctor in the service ordinarily are drawn from all parts of the country. Thus a variety of clinical material, including tropical diseases, is assured. Specialization is encouraged and also a certain amount of research is possible, especially in the field of epidemiology and sanitation.

In volunteering the doctor expects hard work and is eager to give the best he has to the service of his country. At the same time it is a satisfaction for him to realize that in doing so he may derive very real benefit, both personal and professional.

THE WORK OF THE COUNCIL OF NATIONAL DEFENSE.

The people of this country are beginning to realize, after the first shock at the temporary failure of our aircraft program and the ship building project has been forgotten, that the present

military policy of this country is well-founded. In all lines of endeavor we have builded well and firmly from the bottom up. The report of the Committee on Medicine and Sanitation of the Advisory Commission of the Council of National Defense, recently issued, is an illuminating document. The personnel of the General Medical Board is representative of the best in our profession and is broadly and wisely chosen. Every conceivable medical interest and activity which can have any possible bearing on the war has been utilized. Subcommittees have been appointed to supervise reconstruction of maimed and crippled, child welfare, venereal disease, dentistry, the publication of war manuals, hospitals, hygiene and sanitation, industrial medicine and surgery, legislation, medical advisory boards, medical schools, nursing, research, States' activities, surgery in its various subdivisions, the Volunteer Medical Service Corps and women physicians. We do not, at the present moment, recall any subject having the faintest connection with the medical aspect of the war, which has been omitted.

The Committee on Research has conducted its activities in coöperation with the National Research Council and covers a wide field of endeavor. Among the subjects investigated are: the toxicity of canned foods, digitalis grown in America, antitoxin for the Welch bacillus, ear protectors, study of antiseptics and disinfectants, study of shock, substitutes for ambrine, production of acetone by fermentation of starch, dried tetanus as antitoxin, hemostatic preparations, disinfecting wounds by means of gases, sterilization of drinking water, injuries of the peripheral nerves, methods of destroying lice, methods of vaccinating for smallpox, and agglutination tests after vaccination for typhoid fever.

The enthusiasm with which these committees have worked and the favor which their recommendations have found with the Surgeon Generals of the Army, Navy and Public Health Service, leave no doubt that the medical profession is well-prepared to care for the health of our troops and to acquit itself with credit in the great task yet before us.

SOCIETIES

RHODE ISLAND MEDICAL SOCIETY.

ANNUAL MEETING.

R. I. Medical Society Library,
June 6, 1918.

The one hundred and seventh annual meeting was called to order at 4 p. m. by the President, Dr. John Champlin.

The minutes of the previous meeting and the minutes of the May meeting of the Council and the House of Delegates were read by the Secretary.

Dr. Halsey DeWolf reported for the Fiske Fund Essay Committee that no essays had been submitted this year and announced the offering of a prize for 1919 of \$200 for the best essay on the subject "Recent Classification and Treatment of Pneumonia."

The Secretary announced that no award was made by the Chase Wiggin Fund for 1918.

Dr. Roland Hammond demonstrated the patient upon whom he operated before the Society at the clinical meeting at the Rhode Island Hospital in September in 1917, demonstrating the benefit derived from the Albee operation in Pott's disease.

Dr. G. Alder Blumer made an appeal for the aid of physicians in stimulating recruiting of nurses in the Red Cross Drive about to be started and urged the conservation of nurses' services as much as possible consistent with the safety and well being of the sick.

Annual address by the President, Dr. John Champlin, Westerly, R. I., was delivered.

Program of Addresses.

DR. CHAMPLIN:

The first great accomplishment of the war is the kindling of patriotic fire in every man, woman and child in this country. For years, peace, prosperity and luxury had led us into a state of indifference, where selfishness, politics and personal comfort ruled supreme. So self-absorbed were we that not one in ten knew the national anthem, and the man who stood up while it was being played or sung was a curiosity. Our flag for years received scant courtesy, even being employed for advertising purposes. All this has changed; today the blood of every American tingles with pride at the first strain of the Star-Spangled Banner; he stands at attention with uncovered head and throbbing heart as he salutes

the Stars and Stripes, which, God willing, the Germans in Berlin will be made to salute in the near future, together with the flags of our allies, when vanquished Germany will seek an honest peace. The development of the American flag and what it stands for is best told by the Hon. Samuel H. Davis.

DR. CHAMPLIN:

We all feel honored to be a part of the great medical profession; a profession that has at all times and in all emergencies proved its worth willingly and without counting the cost.

The present great crisis in the world's history has been no exception. Physicians and surgeons the world over have made willingly every sacrifice, that the soldiers and sailors may be kept fit to fight for the freedom and liberty of all mankind. Long before the United States entered the war the medical profession began to organize a great scheme for medical preparedness, which has been of infinite service to the Surgeon General in expanding the medical personnel from a mere handful of about 400 men to a quota of over 20,000 men in one year, and the end is not yet, for double that number may be required before we gain final and lasting peace. To accomplish these results someone must have had great foresight, courage and method. No person had more to do with placing the medical profession of this country in the first line trenches of preparedness and keeping them there than Col. F. F. Simpson. He has built for himself by his incessant work, courage and ability a lasting monument.

The following letter is self-explanatory:

June 3, 1918.

Dr. John Champlin,
Westerly, R. I.

My dear Dr. Champlin: On account of some new urgent and imperative duties which have just been placed upon me and which will require a maximum concentration of effort for a considerable period, I find it necessary to forego the pleasure of attending your state meeting. I have, however, asked Dr. R. L. Dickinson, of Brooklyn, a member of the staff of the Council of National Defense, to represent me and to present the subject regarding which I would have spoken. I am sure he will do it clearly, concisely and thoroughly, and that you will be pleased with his discussion. I trust, therefore, that the arrangements will go ahead as planned.

With personal regards, and with the best of

wishes for the success of your meeting and of this enterprise, I am,

Very sincerely yours,

F. F. SIMPSON.

Lt. Col. F. F. Simpson, M. C., N. A.,
Washington, D. C.

It is a pleasure to introduce to you Dr. R. L. Dickinson of Brooklyn, N. Y., a representative of Col. F. F. Simpson, and a member of the Council of National Defense, who will tell you of the activities of the Army Medical Corps.

Address:

"Medical Activities of the Army," Dr. R. L. Dickinson, Assistant to Lieut. Col. F. F. Simpson, Chief of Medical Section, Council of National Defense.

DR. CHAMPLIN:

The advent of the U-boat with its ruthless warfare, which was to bring England to her knees in a few months, has brought to the minds of everyone the importance of all water transportation, and the great necessity of the freedom of the sea. Those who expected great spectacular things from the English Navy were doomed to disappointment. The great service which this navy, together with our own, has accomplished, and is now doing, by bottling up the enemy navy, and making shipping comparatively safe, is appreciated and applauded by all. While the navies are making a fine record in transporting, the medical department of the navy is doing equally well with the transported. The high-grade personnel of the medical department of the navy is doing all that was expected of it. Just what it is doing will be told us by the acknowledged medical orator of the City of Brotherly Love, Lieutenant Commander J. Chalmers Da Costa.

Address:

"Medical Activities of the Navy," Lieut. Com. J. Chalmers DeCosta, U. S. N. R. F.

DR. CHAMPLIN:

We are told that the exception proves the rule. As a rule doctors are credited with just as little business sense as they can have, and live. When the College of American Surgeons drafted President John G. Bowman of the University of Iowa to become its Director, they proved the exception. They acquired a great organizer and classifier of great institutions. The classification of hospitals

is an important war question, about which you will be much enlightened by Mr. John G. Bowman.

Address:

"Hospital Classification as Related to War-Time Needs," Mr. John G. Bowman, Director of American College of Surgeons.

Dr. Champlin welcomed to the chair and the presidency for the ensuing year the newly elected President, Dr. Gardner T. Swarts, Providence.

After adjournment, the Society reconvened at the Wannamoisett Country Club, where dinner was served. The anniversary chairman was Dr. F. T. Rogers and the speakers Rev. Willard Scott and Col. H. Anthony Dyer. Incidental music was furnished by Lucy I. Marsh (Mrs. Gordon) and Miss Marjorie Risk.

Adjourned.

J. W. LEECH, M. D., *Secretary*.

KENT COUNTY MEDICAL SOCIETY.

The regular meeting of the Kent County Medical Society was held at the State Hospital for the Insane at Howard, R. I., June 20, 1918. Under the personal direction of Dr. Harrington and Dr. Simpson an inspection of the old and new buildings of the insane department was made, during which very interesting clinics of pellagra and various forms of mental afflictions were held. Later a collation was served in the dining hall. A unanimous vote of thanks was given Dr. Harrington and Dr. Simpson for their hospitality and courtesy. It was voted to adjourn until September, 1918.

DR. JAMES M. BODWELL, *Secretary*.

WASHINGTON COUNTY MEDICAL SOCIETY.

The regular quarterly meeting of the Washington County Medical Society was held at the Colonial Club, Westerly, July 11, 1918, with thirteen members present and Stephen DeM. Gage, S. B., as guest.

The committee having in charge the matter of Lodge and Contract Work presented its report in the form of a proposed amendment to the By-laws as follows:

"The Society will, by a two-thirds vote, expel any member doing lodge work, after charges in writing have been made to and investigated and sustained by the Board of Censors."

Said proposed amendment will come up for

action at the meeting to be held October 10, 1918.

A communication from J. W. Leech, M. D., Secretary of the Rhode Island State Committee, Medical Section of the Council of National Defense, was read, but no action taken.

Dr. A. S. Briggs of Ashaway, having returned to the jurisdiction of this Society, was reinstated to membership.

Dr. Stephen DeM. Gage addressed the meeting on the subject of "Public Health Now and After the War." He likewise closed the discussion which followed.

Luncheon at the club followed adjournment.

W. A. HILLARD, M. D., *Secretary*.

HOSPITALS

THE MEMORIAL HOSPITAL,
Pawtucket, R. I.

The Trustees, after considering the matter for some time, have decided to increase the rates charged for caring for ward patients:

Ward beds	\$17.50 per week
Single rooms in both wards....	25.00 per week
Double room in male ward.....	20.00 per bed per week

The following schedule of charges has been adopted by the Trustees as applying to the new private ward:

4 bed room (female)	\$25.00 per bed per week
3 bed room (male)	25.00 per bed per week
2 bed room	28.00 per bed per week
10 single rooms	35.00 per week
4 special rooms at front of building	60.00 per week

Charge will be made for medicines, serums and vaccines, also extra supplies or beverages ordered.

Operating room for major operations.....	\$10.00
Operating room for minor operations.....	5.00
Etherizing fee	5.00

LABORATORY SCHEDULE

Complete blood test	\$5.00
Wasserman	5.00
Making and giving of vaccines and serums.....	5.00
Smears and cultures	2.00
Spinal fluid	10.00
Sputums	1.00
Stools	5.00
Pathological sections	5.00
Bacteriological urinalysis	2.00
Stomach contents	5.00

Patients sent in for diagnosis should pay for laboratory examinations as well as for X-ray examinations.

MISCELLANEOUS

CHILD CARE.

Things every mother must know if the nation is to meet the health needs of its children as indi-

cated by the draft and still further revealed by the weighing and measuring test have been made available recently by the Children's Bureau of the U. S. Department of Labor in its new bulletin on Child Care, prepared by Mrs. Max West.

A third of the men examined for military service in the first draft were found to have physical defects which rendered them unfit. Many of these defects might have been overcome if they had been recognized and dealt with in early childhood; the period between two and six is often the time when such defects make their first appearance. "Child Care" has been prepared in the hope that it would enable mothers to understand and recognize symptoms which indicate the need of special care, and also to give mothers the better understanding of the simple laws of hygiene through which it may be possible to prevent the development of such defects at all. It will be especially useful to thousands of mothers who have learned by the weighing and measuring test of defects and weaknesses in their children which need particular attention.

"Child Care" deals with children from two to six years old and is the third issue in the series which began with "Prenatal Care" and "Infant Care." It contains simple rules of health and hygiene, including carefully compiled directions about proper food, suitable clothing, suggestions for play and exercise, for discipline and training. It gives simple menus for young children. A list of books on child care and training is added.

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